



**Keystone Emergency Management Association**

# Membership Invoice

Chester County Department of Emergency Services  
 c/o Tony Przychodzien, Jr., KEMA Treasurer  
 601 Westtown Road, Suite 012  
 West Chester, PA 19380-0990

Date Submitted: \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_  
 Company: \_\_\_\_\_  
 Street Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_  
 Area:  Central     Eastern     Western    County: \_\_\_\_\_

Recruited By	Membership Category	Membership Year	Payment Terms	Payment Methods	Annual Dues
		January 1 – December 31, 2015	Due 60 days upon receipt	cash, check, money order	

Organizational members: please submit 4 additional individuals from your organization below.

1. Name: \_\_\_\_\_ Email Address: \_\_\_\_\_

2. Name: \_\_\_\_\_ Email Address: \_\_\_\_\_

3. Name: \_\_\_\_\_ Email Address: \_\_\_\_\_

4. Name: \_\_\_\_\_ Email Address: \_\_\_\_\_

Please make all checks payable to KEMA. Thank you!